PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004									Application or Docket Number			
									10	10	5533	378
	•	CLAIMS	AS FILED -				•	SMALL EN	TITY	00	OTHER	
115	NATIONAL S	STAGE FEED	(Column 1)			(Column 2)	7		T	OR 7	SMALL	ENTITY
U.S. NATIONAL STAGE FEES			<u> </u>					RATE	FEE		RATE	FEE
BASIC FEE			SMALL ENT			GE ENT. = \$ 300		BASIC FEE		OR	BASIC FEE	300
EXAMINATION FEE			(4) = \$50	Satisfies PCT Article 33(1)- (4) = \$50/\$100		ther situations = ` \$ 100 / \$ 200		EXAM. FEE			EXAM. FEE	200
SEARCH FEE			U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400			ther situations = \$ 250 / \$ 500		SEARCH FEE			SEARCH FEE	400
FEE FOR EXTRA SPEC. PGS.			minus 100 =			/ 50 =		X \$ 125 =			X \$ 250 =	1 7
TOTAL CHARGEABLE CLAIMS			12-mi	nus 20 =	*			X \$ 25 =		OR	X \$ 50 =	1 /
INDEPENDENT CLAIMS			minus 3 =		* '			X \$ 100 =		OR	X \$ 200 =	1 /
MUL	TIPLE DEPEN	DENT CLAIM PR	ESENT			<u> </u>	1	+ \$ 180 =		OR	+ \$ 360 =	3/1
* If	the difference	e in column 1 is	ess than zero, enter "0" in			olumn 2		TOTAL		OR	TOTAL	1210
	T	(Column 1)	LAIMS HIGH			(Column 3)		SMALL E		OR	OTHER SMALL E	NTITY
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X \$ 25 =	-1/	OR	X \$ 50 =	
	Independent	*	Minus .	Minus ***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
			,					TOTAL ADDIT. FEE		OR	TOTAL ADDIT.	
		(Column 1)	•	(Calum	O)	(O-tu 0)	•	•				
		CLAIMS REMAINING AFTER	ī	(Colum HIGHE NUMB PREVIOU	ST ER	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
		AMENDMENT	·.	PAID F		LATIVA	ŀ		FEE			FEE
	Total		Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
	Independent	L	Minus	***		=		X \$ 100 =	1	OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CL				LAIM			+ \$ 180 =		OR	+ \$ 360 =	
							7	TOTAL ADDIT. FEE		OR -	TOTAL ADDIT. FEE	
		·						A.I.				
**	If the "Highest Nu If the "Highest Nu	imn 1 is less than the imber Previously Paid imber Previously Paid inber Previously Paid	I For" IN THIS SP. I For" IN THIS SP.	ACE is less ACE is less	than '20 than '3'.	', enter "20". enter "3"	in the	annondate hav	in column 4		,	
	PTO-875 (Pay 02	* *				The state of the s			in Column 1.			

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